

Public Benefits for Arkansas Seniors 2006

Compiled by



ARKANSAS DEPARTMENT OF HEALTH
& HUMAN SERVICES

Division of Aging and Adult Services

If you need this material in an alternative format, such as large print, audio, tape, etc., please contact
Information & Assistance (501) 682-2441 (voice,voice relay).

Table of Contents

Area Agencies on Aging	4
Electricity Sales Tax Exemption	5
Social Security.....	6-7
Medicare	8
Medicare Part D.....	9-11
Supplemental Social Security Income (SSI)	12-13
Food Stamps	14-15
Medicaid	16-17
Medically Needy Spend Down	18
Qualified Medicare Beneficiary (QMB)	19-20
ARSeniors Medicaid Program	21
Pickle Amendment Medicaid	22-23
Working Disabled Medicaid	24
Specified Low-Income Medicare Beneficiary (SMB)	25
Qualified Individual-1	26
Home and Community Based Programs	27
ElderChoices.....	28-29
Alternatives.....	30
Assisted Living	31
IndependentChoices	32
Medicaid-Nursing Home Care	33-34
Commodities Distribution Program	35
Home Energy Assistance.....	36
Weatherization.....	37
Aging Services Summary of Eligibility	38-41
Medicaid Covered Services	42-44
Social Security Office by County Served.....	45-48
Social Security Administration District Offices for Arkansas.....	49
Arkansas Dept. of Human Services (DHHS) County Offices	50-52
Community Action Programs Serving Arkansas	53-56
Summary of Benefits.....	57

Introduction

Public Benefits for Arkansas Seniors 1998 was originally developed and updated by the Area Agency on Aging (AAA) of Northwest Arkansas and disseminated by the Division of Aging and Adult Services to provide seniors with basic information about public benefits available to them. This resource is an effort to inform seniors who may not be aware of benefits that can help them meet housing, food, energy, and medical costs. For extra copies of this resource, please contact your (AAA) or the Division of Aging and Adult Services, PO Box 1437, Slot S-530, Little Rock AR 72203, Telephone (501) 682-2441. **Available in alternative format.**

Note: Please note that eligibility can only be determined by application to the appropriate agency. The information provided here is meant to be a general overview. Also, it is important to note that eligibility criteria change periodically and the figures stated here are subject to change. For more information or for assistance in applying for benefits, contact the Area Agency on Aging in your area. The eight Arkansas Area Agencies on Aging are listed on the next page. In addition to the Area Agencies on Aging, agencies enrolled in the Targeted Case Management program are also available to assist in applying for benefits. If you would like a list of the case management agencies in your area, please call 501-682-2441.

Arkansas Area Agencies on Aging

<u>Area Agencies on Aging</u>		<u>Counties Served</u>
<u>AAA of Northwest AR Region I</u> 1510 Rock Springs Road P O Box 1795 Harrison AR 72602-1795 Phone: 870-741-1144	Toll Free: 1-800-432-9721 TDD: 870-741-1346 www.aaanwar.org/	Baxter, Benton, Boone, Carroll, Madison, Marion, Newton, Searcy and Washington
<u>White River AAA Region II</u> 3998 Harrison Street P O Box 2637 Batesville AR 72503 Phone 870-612-3000	Toll Free & TDD: 1-800-382-3205 www.wraaa.com/	Cleburne, Fulton, Independence, Izard, Jackson, Sharp, Stone, Van Buren, White and Woodruff
<u>East AR AAA Region III</u> 2005 E. Highland/Fountain Sq./ P O Box 5035 Jonesboro AR 72403-5035 Phone: 870-972-5980	Toll Free: 1-800-467-3278 www.e4aonline.com/	Clay, Craighead, Crittenden, Cross, Greene, Lawrence, Lee, Mississippi, Phillips, Poinsett, Randolph and St. Francis
<u>AAA of Southeast AR Region IV</u> 709 East 8 th P O Box 8569 Pine Bluff AR 71611 Phone: 870-543-6300	Toll Free & TDD: 1-800-264-3260 www.aaasea.org/	Arkansas, Ashley, Bradley, Chicot, Cleveland, Desha, Drew, Grant, Jefferson and Lincoln
<u>CareLink (Central AR AAA) Region V</u> 706 West 4 th Street P O Box 5988 N. Little Rock AR 72119 Phone: 501-372-5300	Toll Free & TDD: 1-800-482-6359 www.care-link.org/	Faulkner, Lonoke, Monroe, Prairie, Pulaski and Saline
<u>AAA of West Central AR Region VI</u> 905 W Grand Avenue Hot Springs AR 71901 Phone: 501-321-2811	Toll Free: 1-800-467-2170 www.seniorspecialists.org/	Clark, Conway, Garland, Hot Spring, Johnson, Montgomery, Perry, Pike, Pope and Yell
<u>AAA of Southwest AR Region VII</u> P O Box 1863 Magnolia AR 71754-1863 Phone: 870-234-7410	Toll Free: 1-800-272-2127 www.agewithdignity.org/	Calhoun, Columbia, Dallas, Hempstead, Howard, Lafayette, Little River, Miller, Nevada, Ouachita, Sevier and Union
<u>AAA of Western AR Region VIII</u> 524 Garrison P O Box 1724 Fort Smith AR 72902 Phone: 479-783-4500	Toll Free: 1-800-320-6667 www.agingwest.org/	Crawford, Franklin, Logan, Polk, Scott and Sebastian

Electricity Sales Tax Exemption

What Is It?

Low-income electric utility customers are eligible for a state sales tax exemption on the first 500 Kilowatt-hours of use each month. This savings reduces the monthly electric bill.

Eligibility Criteria

Any electric utility customer with a combined household income of \$12,000 a year or less.

How To Apply?

Complete a simple one-page registration form and mail to your electric company. These forms are available from your local Electric Company, Revenue Office, Department of Health & Human Services, Community Action Agencies, Senior Centers, and Area Agency on Aging.

Social Security

What Is It?

Social Security pays retirement, disability, survivors and family dependent benefits for eligible insured persons and their dependents.

Eligibility

Retirement

Age	62 years old - early retirement with reduced benefit.
Age	65+ years old - full retirement benefit (age is going up)
Insured	Ten years of coverage will fully insure a worker and his family for life.
Benefit amount	Benefit amount is based on the average yearly earnings of your working career under Social Security. Maximum benefit is over \$2,053 a month.
Earning Test	Under full retirement age \$12,480/year (\$1,040/month) *There is no limit on earnings beginning the month an individual attains full retirement age (65 and 6 months for retirees born in 1940; 65 and 8 months for those born in 1941). Full retirement age will gradually increase to age 67 for those born in 1960 and later.

Note: **Under full retirement age** – one dollar in benefits will be withheld for every \$2 in earnings above the limit.

Eligibility

Disability

For a worker to qualify for disability benefits, he or she must be unable to engage in any substantial, gainful employment due to a physical or mental impairment that either: (1) is expected to result in death; or (2) has lasted or is expected to last for at least 12 months.

To be eligible for disability payments, you must meet the following tests:

- You must have the same amount of work credit that would be required if you reached retirement age in the year you were disabled.

- You must have 20 quarters (5 years) of coverage out of the preceding 40 calendar quarters (10 years before you qualify as disabled). (Exception for disability by blindness.)

Eligibility

Survivors

If a worker dies and has enough Social Security work credits, survivor's benefits can be paid to the worker's:

- widow or widower - full benefits at full retirement age or reduced benefits as early as 60. A disabled widow or widower can get benefits between 50 - 60.
- widow or widower at any age if she or he takes care of worker's child under 16 or disabled who gets benefits.
- unmarried children under 18 (or 19 if they are attending elementary or secondary school full time.) The child can get benefits at any age if he or she was disabled before 22 and remains disabled. Under certain circumstances, benefits can also be paid to the grandchildren.
- dependent parents 62 or older.

Special One-Time Death Benefit

There is a special one-time payment of \$255 that can be made. It can go only to your eligible widow or widower, or if none, to the child who gets benefits on your record.

How Much Social Security To Expect

Being covered or insured only means that a person can receive benefits. The amount a person receives in monthly checks depends on the average yearly earnings of the person's working career under Social Security. These basic benefits are now automatically adjusted upward every January to keep pace with the cost of living.

To apply for Social Security benefits, you can visit www.socialsecurity.gov/ on the web, call 1-800-772-1213 or visit your local Social Security office (see pages 45-48).

Income Guidelines change in January 2007.

Medicare

What Is It?

Medicare is a federal health insurance program.

Eligibility

1. Social Security beneficiaries who are 65 or older.
 2. Social Security disability beneficiaries who have received benefits for 24 months.
 3. Social Security beneficiaries and their dependents that need dialysis treatment or a kidney transplant.
 4. ALS or Lou Gehrig's disease.
 5. Most persons who are 65 or older but not Social Security beneficiaries are eligible to pay for Medicare coverage, or if they meet the guidelines, are eligible for Medicaid to pay their Medicare premiums through SSI, QMB, or ElderChoices. SMB and QI-1 only pays for Part B.
-

What Does It Pay For?

Medicare has two parts – Medicare Part A (Hospital Insurance) helps cover your inpatient care in hospitals, including critical access hospitals, and skilled nursing facilities (not custodial or long-term care). It also helps cover hospice care and some home health care. Medicare Part B (Medical Insurance) helps cover your doctors' services and outpatient care. It also covers some other medical services that Part A doesn't cover, such as some of the services of physical and occupational therapists, and some home health care. Part B helps pay for these covered services and supplies when they are medically necessary.

Medicare doesn't pay for all medical costs.

Part A - Hospital Deductible \$952.00

Part B -	Premium	\$88.50
	Deductible	\$124.00

After patient has paid the deductible, part B pays for 80% of covered services.

How To Apply?

Contact your local Social Security Office. For more information visit www.medicare.gov/
Premiums and deductibles change January 2007.

Medicare Part D Prescription Drug Benefit

Starting January 1, 2006, the new Medicare Part D prescription drug coverage became available to everyone with Medicare. Everyone with Medicare can get this coverage that may help lower prescription drug costs and help protect against higher costs in the future. Medicare Prescription Drug Coverage is insurance. Private companies provide the coverage. You choose the drug plan and pay a monthly premium. Like other insurance, if you decide not to enroll in a drug plan when you are first eligible, you may pay a penalty if you choose to join later.

How To Enroll In A Medicare Prescription Drug Plan?

To enroll, you must have Medicare Part A or Part B. Existing Medicare beneficiaries can first enroll November 15, 2005 through May 15, 2006. This is called the “initial open enrollment period.” After May 15, 2006, the next opportunity to enroll for existing Medicare beneficiaries will be November 15, 2006-December 31, 2006. Enrolling is your choice, but you must sign up if you want the coverage.

To join, you will need to decide how you want to get your prescriptions. You can

- get all your health care benefits and prescriptions through a Medicare Advantage Managed Care Plan that offers optional coverage for prescription drugs (this is like an HMO and may include restrictions on which doctors and hospitals you can use),
- get your health care benefits through the Original Medicare Plan and choose a Medicare prescription drug plan, or
- get your health care benefits through another type of Medicare Advantage health plan or a Medicare Managed Care Plan that isn't a Medicare Advantage Plan. In these kinds of plans, you may be able to choose a Medicare prescription drug plan.

How Plans Work

Medicare prescription drug plans might vary, but in general, this is how standard coverage (the minimum coverage the plans must provide) will work. If you join in 2006, for covered drugs you will pay

- a **monthly** premium (varies depending on the plan you choose, but the 41 plans offered in Arkansas vary from \$10.31 per month to \$67.98 per month at the time of this publication.) The more expensive plans offer more than standard coverage.
- you may pay the first \$250 per year for your prescriptions. This is called your “deductible.” Some of the plans do not charge a deductible, but have a higher monthly premium.

After you pay the \$250 yearly deductible, **here's how the costs work:**

- You pay 25% of your yearly drug costs from \$250 to \$2,250, and your plan pays the other 75% of these costs, then
- You pay 100% of your drug costs from \$2,251 until your out-of-pocket costs reach \$3,600, then
- You pay 5% of your drug costs (or a small copayment) for the rest of the calendar year after you have spent \$3,600 out-of-pocket and your plan pays the rest.

Joining is your choice. However, **if you don't join when you are first eligible, you may have to pay a higher premium if you choose to join later.** You will have to pay this higher premium for as long as you have a Medicare prescription drug plan.

Note: If your employer or union offers you drug coverage, you might not need to join a Medicare drug plan. If that coverage offers the same or better benefits as described above, you won't have to pay a higher premium if you decide to join later. Your employer should have sent you a letter telling you if your coverage is the same as or better than Medicare's. Check with your other insurance to see how your coverage compares. **CAUTION:** If you retiree health coverage offers a prescription drug plan comparable to Medicare and you enroll in a Part D plan, you may jeopardize all of your retiree health coverage. Check with your insurance plan before making a change.

There is **Extra Help** for people with limited income and resources to help pay for their prescription drug costs. If you qualify, you will get help paying for your drug plan's monthly premium, yearly deductible, and prescription co-payments.

How do I qualify for this program? The amount of extra help you receive will be based on your income and resources (including your savings and stocks, but not counting your home or car). You may qualify if your income is below \$14,700 and you are single, and \$19,800 if you are married and living with your spouse, and if your resources are less than \$11,500 if you are single or \$23,000 for a married couple.

Medicaid Recipients: If you are a Medicaid recipient, you must receive your prescription drugs through a Medicare Part D plan. Medicaid will not pay for prescription drugs for individuals entitled to Medicare as of January 1, 2006. Individuals on Medicaid (including QMB, SMB and QI-1) will automatically qualify for Extra Help and will not be responsible for premiums or deductibles. There will be a small copay ranging from \$1.00 to \$5.00.

How do I apply for this program? Medicare mailed letters to people who automatically qualify for extra help in May or June of 2005. If you didn't automatically qualify, the Social Security Administration (SSA) sent people with certain incomes an application for this extra

help. If you didn't get an application but think you may qualify, call 1-800-772-1213, visit www.socialsecurity.gov on the web, or apply at your Social Security office, or contact the State Medical Assistance office (1-800-482-5431).

The above information is taken primarily from the publication, Medicare & You 2006 by the Centers for Medicare & Medicaid Services. The publication has information about Medicare Part D prescription drug coverage and was mailed to all Medicare recipients in 2005. The publication also can be access at <http://www.medicare.gov/publications/pubs/pdf/10050.pdf> or you may visit www.medicare.gov or call 1-800-MEDICARE to request a copy.

Resources for Information on Medicare Part D:

For more information on all aspects of Medicare Part D prescription drug coverage, visit www.medicare.gov on the web. The site includes a drug plan finder and many other resources to help you make decisions about your drug plan coverage.

Local AAA's (Area Agencies on Aging) are assisting with Part D enrollment. Call 1-866-651-2273 to locate your local AAA and contact them for assistance.

Seniors Health Insurance Information Program (SHIIP) in Arkansas is also assisting with Part D enrollment. Call 1-800-224-6330.

Arkansas Senior Medicare/Medicaid Fraud Patrol along with regional partners is assisting with Part D enrollment. Call the toll-free hotline at 1-866-726-2916 for more information.

For more information visit www.medicare.gov/

Supplemental Security Income (SSI)

What Is It?

SSI is a federal income supplement program funded by general tax revenues.

Eligibility

To get SSI, a person must be 65 or blind or disabled and meet the income and resource guidelines.

- * Blind means you are either totally blind or have very poor eyesight.
 - * Disabled means you have a physical or mental problem that keeps you from working and is expected to last at least a year or to result in death.
-

Income Limits

Individual - If the person has no income, the check amount is \$603 per month.

For a person with Social Security income, the SSI benefit amount is reduced according to income to bring the total up to \$603. There is a general exclusion of \$20 a month. ($\$603 + \$20 = \623)

Couple - If the couple has no income, the check amount is \$904 a month.

For a couple with Social Security, the SSI benefit amount is reduced according to income to bring the total up to \$904. There is a general exclusion of \$20 for a couple ($\$904 + \$20 = \924)

Not all income counts. The first \$20 of individual income does not count. The first \$65 of earned income and one-half of earnings over \$65 a month does not count. VA Aid & Attendance and the portion of a VA benefit that is paid to you for a dependent do not count as income. The first \$64 of earned income and one-half of earnings over \$65 a month do not count.

NOTE: For a couple, when one spouse is ineligible for SSI and receives a Veteran's Pension, the rule for determining eligibility is different than usual. On determining the spouse's eligibility, none of the Veteran's income from any source is counted. The spouse's eligibility would be determined using only her income plus the amount of the Veteran's pension that is

paid for her as his dependent. This means that a couple can have a combined income that is substantially higher than the normal SSI benefit.

If you live with someone else in their house and do not pay your share of household expenses, the benefit amount is reduced by 1/3 to \$402.00 a month for an individual and \$602.67 for a couple.

Resource Limits -	Individual	\$2,000
	Couple	\$3,000

Not all resources count. Your home and the land it is on, most household goods, a car, and personal property do not count.

What Does It Pay?

If you qualify for SSI, you will receive a monthly benefit check. You will also automatically become eligible for Medicaid. You will receive a plastic Medicaid card. Medicaid pays for many medical expenses.

How To Apply?

Apply for SSI by calling or visiting your local Social Security Office or visit Social Security on line at www.socialsecurity.gov.

Income guidelines for SSI change in January 2007.

Food Stamps

What Are They?

The Food Stamp Program provides food assistance to eligible households to cover a portion of a household's food budget. Benefits are distributed through an Electronic Benefits Transfer (EBT) card. This benefit can help qualified older Americans on fixed incomes to stretch their food budgets.

Who Is Eligible?

Residency/Citizenship: An applicant must live in the county in which the application is filed and be a U.S. citizen or a lawfully admitted alien.

Lawful Food Stamp Household: Applicants must not be boarders, ineligible students, disqualified individuals or residents of an institution.

Work Registration: All able-bodied people, ages 18 through 59, who are not exempt (exempt by reason of being employed, having care of dependent children or being incapacitated), must register for work. People who quit their jobs without good cause will not be allowed to participate in the program for a period of three months.

	Households with a member <u>age 60 or older or disabled</u>	Non-elderly/non-disabled <u>households</u>
Resources:	\$3,000	\$2,000
Income:	Net income after deductions	
	1 person household - \$ 798	
	2 person household - \$ 1070	

The above figures reflect income eligibility by household. However, elderly persons can be certified separately from the rest of the household if they meet one of the following criteria:

- 1) they customarily contribute to household expenses (more than 50% of the amount) and purchase and prepare meals separately from others in the rest of the household or
- 2) in some cases if they are unable to purchase and prepare meals because of a disability.

There is a standard deduction of \$134 a month for each household. There is a \$240 a month standard deduction for utility costs. Elderly and disabled households can deduct shelter costs without being subject to a maximum. They are also eligible for a deduction for out-of-pocket medical costs over \$35 a month.

Amount Of Benefit

The number of food stamps received depends on income and deductions and number of persons in the household. Persons on SSI are automatically eligible for at least \$10.00 a month in food stamps.

How To Apply?

Apply at the County Department of Health & Human Services Office. For more information visit www.arkansas.gov/dhhs/dco/

Income guidelines change October 2006.

Medicaid

What Is It?

Medicaid is a joint federal-state program that provides limited medical services and contributes toward the costs of medical care for eligible persons. In Arkansas, Medicaid is administered by the Department of Health & Human Services Division of Medical Services.

Categories of Medicaid that apply to Arkansans who are elderly and individuals with disabilities:

SSI - A person who is eligible for SSI is automatically eligible for Medicaid.
(See SSI, page 12-13.)

Medically Needy Spend Down - A person who is over the income limits for regular Medicaid but has unusually high medical expenses may receive Medicaid coverage for a limited time.
(See Medicaid Spend Down, page 18.)

QMB - Medicare recipients who are over the regular Medicaid income limits may be eligible for QMB to pay their Medicare premiums, deductibles and coinsurance. (See QMB, page 19-20.)

ARSeniors – For QMBs age 65 and older who have lower income. ARSeniors provides full Medicaid coverage. It is the only coverage group in the Medicare Savings categories that provides the full range of Medicaid benefits. (See ARSeniors, page 21.)

Pickle Amendment – A federal law that helps former SSI recipients qualify for Medicaid, by disregarding all of the Social Security cost-of-living adjustments since they lost SSI. (See Pickle Amendment, page 22- 23)

Working Disabled – A category of Medicaid for individuals with disabilities and disabling medical conditions, who support themselves by working, rather than by disability benefits such as SSI and Social Security Disability. (See Working Disabled, page 24)

SMB – Medicare recipients that are over the income limits for regular Medicaid and QMB may be eligible for SMB. SMBs are eligible for the payment of Medicare Part B premiums only. No other Medicare cost sharing charges will be covered. (See SMB, page 25.)

QI-1s – Medicare recipients that are over the income limits for regular Medicaid, QMB and SMB may be eligible for QI-1. QI-1s are eligible for the payment of Medicare Part B premiums only. (See QI-1, page 26.)

ElderChoices – A home and community based program funded by Medicaid as an alternative to nursing home care. (See ElderChoices, page 28-29)

Alternatives – A Medicaid program of community and home based services as an alternative to nursing home care. **(See Alternatives, page 30)**

Assisted Living – A Medicaid home and community based waiver program that will provide 24-hour supervision and supportive services including limited nursing services in a congregate setting to persons (age 65 or over) or 21 years of age or over that are blind and disabled. **(See Assisted Living, page 31)**

IndependentChoices – A Medicaid waiver for Medicaid eligible persons age 18 and above who have a medical need for personal care service. **(See IndependentChoices, page 32)**

Nursing Home Care – A category of Medicaid to pay for nursing home care. **(See Nursing Home Care, page 33-34)**

For more information visit www.medicaid.state.ar.us/ or www.arkansas.gov/dhhs/dco/ .

Medically Needy Spend Down

What Is It?

The Medically Needy Spend Down is a Medicaid category that provides temporary coverage for persons with high medical expenses who would not normally qualify for Medicaid because of income.

Eligibility

Age 65, blind or disabled.

<u>Income</u>	In general, out-of-pocket medical expenses must exceed monthly income over a three-month period.
---------------	--

<u>Resources</u>	Individual	Couple
	\$2,000	\$3,000

Applicants may deduct medical expenses (including Medicare and health insurance premiums, deductibles, co-payments) incurred during a three-month Spend-Down period, plus other old, unpaid medical bills to reduce their countable income to below the Medically Needy income limits.

The Spend Down period (three months) can go back as far as the three months before the month of the application, or can include the three months following the month of application.

What Does It Pay For?

High unpaid medical expenses for a three-month period.

How To Apply?

Apply at the County Department of Health & Human Services. For more information visit www.arkansas.gov/dhhs/dco/ .

Qualified Medicare Beneficiary (QMB)

What Is QMB?

The QMB program is a category of Medicaid for low-income persons who are eligible for Medicare.

Eligibility Criteria

Those eligible for Medicare Part A.

Income Limits	Individual	Couple
	\$836.67	\$1120.00
	(both amounts include \$20*)	
Resource Limits	Individual	Couple
	\$4,000	\$6,000

If a person has Medicare Part B, the \$88.50 premium is counted as part of the income. If a person has earned income, the income can be somewhat higher and still qualify.

The home, automobile, household contents, personal possessions, and most burial arrangements do not count as resources. There will be no penalty imposed for transfer of resources.

What Does QMB Pay For?

If you are eligible, QMB will pay your Medicare Part B premiums, \$88.50 per month. It will pay for your Medicare Part A premiums if you are not eligible for free premiums. It also pays Medicare deductibles and co-payments. It automatically provides Extra Help for Medicare Part D. So it acts as a free Medicare supplement. However, persons with QMB are responsible for a coinsurance of 50% of the first day of a hospital stay, a maximum of 50% of the Medicare deductible.

Medicare Part A Hospital Insurance

Premium – Most people do not pay a monthly Part A premium because they or a spouse has 40 or more quarters of Medicare-covered employment. The Part A premium is \$216.00 for people having 30-39 quarters of Medicare-covered employment. The Part A premium is \$393.00 per month for people who are not otherwise eligible for premium-free hospital insurance and have less than 30 quarters of Medicare-covered employment.

Deductible - \$952 per spell of illness

Coinsurance - 61st to 90th days

Medicare Part B Medical Insurance

Premium - \$88.50

Deductible - \$124 per year

Co-insurance - 20% up to Medicaid limits

QMB only covers gaps in Medicare, and does not cover Medicaid services such as prescriptions or eyeglasses. QMB will automatically provide Extra Help for prescription drugs through Part D.

To Apply For QMB:

Apply at the Department of Health & Human Services County Office. You may apply on the Medicare Savings Application (DCO-808) and mail it in. An in office interview will not be required. Call your local Department of Health and Human Services County Office for a copy of this application. For more information visit www.arkansas.gov/dhhs/dco/.

*Income guidelines are 100% of Federal Poverty guidelines plus \$20 and subject to change in April 2007.

ARSeniors Medicaid Program

What is ARSeniors?

The ARSeniors program is a new category of Medicaid for low-income seniors.

Eligibility Criteria

Must be 65 years of age or older. ARSeniors recipients do not have to be entitled to Medicare. However, individuals who are entitled to Medicare and choose not to enroll in Medicare are not eligible for the ARSeniors program.

Income Limits	Individual \$673.34 (both amounts include \$20*)	Couple \$900.00
Resource Limits	Individual \$4,000	Couple \$6,000

If a person has Medicare Part B, the \$88.50 premium is counted as part of the income. If a person has earned income, the income can be somewhat higher and still qualify.

The home, automobile, household contents, personal possessions, and most burial arrangements do not count as resources. There will be no penalty imposed for transfer of resources.

What Does ARSeniors Pay For?

Eligible recipients will receive the full range of Arkansas Medicaid benefits. This includes payment of Medicare premiums, deductibles and co-payments. Medicaid benefits that are not covered by Medicare will be available to ARSeniors. For example, non-emergency medical transportation and personal care services. ARSeniors must receive prescriptions drug coverage through Medicare Part D if entitled to Medicare. Recipients of ARSeniors entitled to Medicare automatically receive Extra Help for Part D.

To Apply For ARSeniors:

Apply at the Department of Health & Human Services County Office. You may apply on the Medicare Savings Application (DCO-808) and mail it in. An in office interview will not be required. Call your local Department of Health & Human Services County Office for a copy of this application.

*Income guidelines are 80% of the Federal Poverty guidelines plus \$20 and subject to change in April 2007. For more information visit www.arkansas.gov/dhhs/dco/

Pickle Amendment Medicaid

Former SSI Recipients may qualify for Medicaid again by disregarding their Social Security Cost-of-Living Adjustments

The Pickle amendment is a federal law that helps former SSI recipients qualify for Medicaid, by disregarding all of the Social Security cost-of-living adjustments since they lost SSI. This adjustment helps some low-income Medicare beneficiaries regain Medicaid coverage, which helps pay for medical services not covered by Medicare.

It doesn't matter why a person lost SSI, as long as they fit the screening guidelines below. This screening method was developed by attorney and health care advocate Gordon Bonnyman of the Tennessee Justice Center.

Screening Process for Pickle Amendment

Screening for Pickle amendment is fairly easy using the guidelines and table below, and a calculator. Here are a few steps to help determine whether a person might be eligible:

1. Did this person ever receive both Social Security and SSI benefits in the same month (after April 1977)?
2. Is the person currently receiving a Social Security check, but not an SSI check?
3. Is the person's total income *over* the limit for SSI? (In 2006, \$623 per month for a single person receiving Social Security benefits, and \$924 for a couple with Social Security income).
4. Are the person's resources (assets) under the Medicaid limit of \$2,000 for one person and \$3,000 for a couple, not counting the home, household goods, and car?
5. If the answer to all of the questions above is yes, find out the last month the person received both SSI and Social Security. Then find the reduction factor for that month and year in the chart below. For example, if someone lost his or her SSI in 1990, the reduction factor is .641. That means only 64.1% of the applicant's Social Security check is counted.
6. Multiply the current Social Security income (before the Medicare premium is deducted) by the reduction factor. Add any non-Social Security income, such as a pension or interest on a CD, and then compare the adjusted monthly income to the SSI income limits.
7. If the adjusted monthly income is below the SSI income limits, and the assets are below the Medicaid limits, then the person is probably eligible for Medicaid under the Pickle amendment. Even persons whose adjusted income is slightly *over* the limit may be eligible, because this method produces an estimate.
8. Applicants must apply for Medicaid through the Arkansas Department of Health and Human Services (DHHS) County Office. This Medicaid category is described in section 2030 of the Arkansas *Medical Services Manual*. DHHS will contact the Social Security Administration to calculate precisely the effect of removing each year's cost-

of-living adjustment. The amount you calculate using the chart below may be different from what DHHS calculates if you have received other Social Security increases in addition to COLAs.

9. For help applying, contact the Area Agency on Aging in your area.

2006 Reduction Factors for Calculating Medicaid Eligibility Under the Pickle Amendment

Last month individual received both SSI and Social Security	Multiply 2006 Social Security income by
Jan. '05 – Dec. '05	.961
Jan. '04 – Dec. '04	.935
Jan. '03 – Dec. '03	.916
Jan. '02 – Dec. '02	.903
Jan. '01 – Dec. '01	.881
Jan. '00 – Dec. '00	.851
Jan. '99 – Dec. '99	.831
Jan. '98 – Dec. '98	.820
Jan. '97 – Dec. '97	.803
Jan. '96 – Dec. '96	.781
Jan. '95 – Dec. '95	.761
Jan. '94 – Dec. '94	.740
Jan. '93 – Dec. '93	.721
Jan. '92 – Dec. '92	.700
Jan. '91 – Dec. '91	.675
Jan. '90 – Dec. '90	.641
Jan. '89 – Dec. '89	.612
Jan. '88 – Dec. '88	.588
Jan. '87 – Dec. '87	.565
Jan. '86 – Dec. '86	.557
Jan. '85 – Dec. '85	.541
Jan. '84 – Dec. '84	.522
July '82 – Dec. '83	.505
July '81 – June '82	.470
July '80 – June '81	.423
July '79 – June '80	.370
July '78 – June '79	.336
July '77 – June '78	.316
May and June '77	.298

Working Disabled Medicaid

What is Working Disabled?

Working Disabled is a category of Medicaid for individuals with disabilities and disabling medical conditions, who support themselves by working, rather than by disability benefits such as SSI and Social Security Disability.

Eligibility Criteria

1. 16 to 64 years of age.
2. Meet the Social Security/SSI definition of disability, except full-time employment is allowed.
3. Work and have work income reported to the IRS.
4. Non-work income, such as Social Security, workers compensation, VA benefits or pension, cannot exceed \$623 per month.
5. Net personal income (HALF of work income plus ALL non-work income) cannot exceed 250% of the federal poverty level for the individual's family size. A single individual could earn up to about \$4,000 per month. The income of the spouse and other family members is not counted.
6. Resources cannot exceed \$4,000 for a single person and \$6,000 for a couple. In addition, an applicant can have up to \$10,000 in a separate Approved Account, to be used for education, job training, a home or vehicle, or out-of-pocket health care costs.

The home, automobile, household contents, personal possessions, and most burial arrangements do not count as resources. There will be no penalty imposed for transfer of resources.

What Services Does Working Disabled Pay For?

Eligible recipients will receive the full range of Arkansas Medicaid benefits. It will also supplement Medicare by paying Medicare premiums, deductibles and co-payments.

To Apply For Working Disabled:

Apply for Working Disabled at the Department of Human Services County Office. For more information, call the Employment Sources Hotline, 1-866-283-7900.

Specified Low-Income Medicare Beneficiary (SMB)

What Is SMB?

The Specified Low-Income Medicare Beneficiary program is a category of Medicaid for low-income persons who are eligible for Medicare Part A.

Eligibility Criteria

Those eligible for and receiving Medicare Part A.

Income Limits	Individual	Couple
	\$1,000.00 (both amounts include \$20*)	\$1,340.00
Resource Limits	Individual	Couple
	\$4,000	\$6,000

If a person has Medicare Part B, the \$88.50 premium is counted as part of the income. If a person has earned income, the income can be somewhat higher and still qualify.

The home, automobile, household contents, personal possessions, and most burial arrangements do not count as resources. No penalty will be imposed for transfer of resources.

What Does SMB Pay For?

If you are eligible, SMB will pay your Medicare Part B premiums. SMB does not cover other Medicaid services such as medical care, prescriptions, or eyeglasses. You will not receive a Medicaid card. SMB recipients automatically qualify for Extra Help in receiving prescription drugs through a Medicare Part D prescription drug plan.

To Apply For SMB:

Apply at your County Department of Health & Human Services Office. You may apply on the Medicare Savings Application (DCO-808) and mail it in. An in office interview will not be required. Call your local Department of Health & Human Services County Office for a copy of this application. For more information visit www.arkansas.gov/dhhs/dco.

*Income guidelines are 120% of the Federal Poverty Guidelines plus \$20 and are subject to change April 2007.

Qualified Individual-1

What Is It?

The Qualified Individual-1 program is a category of Medicaid for Medicare beneficiaries whose income is above the SSI, QMB and SMB income guidelines to pay for their Medicare Part B premium. Persons receiving this benefit are not eligible for any other Medicaid benefit.

Eligibility Criteria

Those eligible for Medicare Part A.

Income Limits	Individual \$1,122.50 (both amounts include \$20)	Couple \$1,505.00
Resource Limits	Individual \$4,000	Couple \$6,000

If a person has Medicare Part B, the \$88.50 premium is counted as part of the income. If a person has earned income, the income can be somewhat higher and still qualify.

The home, automobile, household contents, personal possessions, and most burial arrangements do not count as resources. There will be no penalty imposed for transfer of resources.

What Does QI-1 Pay For?

If you are eligible, QI-1 will pay your Medicare Part B premiums (\$88.50 year.) QI-1 recipients automatically qualify for Extra Help in receiving prescription drugs through a Medicare Part D prescription drug plan. QI-1 beneficiaries are not eligible for any other Medicaid services and will not receive a Medicaid card.

To Apply For QI -1:

Apply at the Department of Health & Human Services County Office. You may apply on the Medicare Savings Application (DCO-808) and mail it in. An in office interview will not be required. Call your local Department of Health & Human Services County Office for a copy of this application.

For more information visit www.arkansas.gov/dhhs/dco/.

*Income guidelines are 135% of the Federal Poverty guidelines plus \$20 and subject to change in April 2007.

Home and Community Based Programs

The following 3 programs (ElderChoices, Alternatives and Assisted Living) have the same financial and medical eligibility.

Eligibility Criteria

Income	\$1809 per month	
	Only the individual's income is counted even for a married couple	
Resources	Individual	Couple
	\$2,000	\$3,000
Medical Need	A person must meet the same medical criteria as used to determine Intermediate Level of Care in a Nursing Home.	

Income guidelines change January 2007.

ElderChoices

What Is It?

ElderChoices is a home and community based program funded by Medicaid as an alternative to nursing home care.

Eligibility Criteria

Age 65 or older

Resources If there is a spouse living in the home who is not eligible for ElderChoices, a minimum of \$19,908 may be protected for the spouse, in addition to the \$2000 allowed for the ElderChoices applicant/recipient.

Medical Need A person must meet the same medical criteria as used to determine Intermediate Level of Care in a Nursing Home.

What Does It Cover?

An ElderChoices recipient may receive a combination of services based on medical need and availability of the service.

Covered Services

- 1) Adult Day Care
- 2) Adult Day Health Care
- 3) Homemaker
- 4) Chore
- 5) Home Delivered Meals
- 6) Personal Emergency Response System
- 7) Adult Foster Care
- 8) Respite Care

An ElderChoices recipient is also eligible for all other regular Medicaid services, such as doctor and hospital services. Note: Recipients on ElderChoices who are also entitled to Medicare must receive prescription drugs through a Medicare Part D plan. ElderChoices recipients automatically qualify for Extra Help for Part D coverage.

How To Apply?

Apply at your County Department of Health & Human Services Office. Form DCO-777 must be completed to determine financial eligibility. A DHHS Registered Nurse will visit the applicant to assess for medical need, obtain the physician's signature on the forms and send to the Utilization Review Committee in Little Rock to determine medical eligibility, if needed. This program is subject to Estate Recovery provisions upon death of the client.

For more information visit www.arkansas.gov/dhhs/aging/. Income guidelines will change January 2007.

Alternatives

What Is It?

Alternatives for Adults with Physical Disabilities is a Medicaid program of community and home based services as an alternative to nursing home care.

Eligibility Criteria

Age	21 through 64 years of age
Medical Need	A person must meet the same medical criteria as used to determine Intermediate Level of Care in a Nursing Home.
Physically Disabled	An individual must be determined physically disabled by the Social Security Administration or the Medical Review Team in DHHS.

What Does It Cover?

Alternatives is a consumer-directed program that allows recipients to receive Attendant Care and/or Environmental Adaptations based on their needs. The cost of services may not exceed the cost of nursing home care.

How To Apply?

To apply, a person or his/her representative should contact the local Department of Health & Human Services county office.

Income guidelines will change January 2007.

For more information visit www.arkansas.gov/dhhs/aging/

Assisted Living

What Is It?

Assisted Living is a Medicaid home and community based waiver program that will provide 24-hour supervision and supportive services including limited nursing services in a congregate setting to persons (age 65 or over) or 21 years of age or over that are blind or disabled.

Eligibility Criteria

Age	Aged person (age 65 or over) or 21 years of age or over and blind or disabled, as determined by the SSA or DHHS Medical Review Team.
Resources	If there is a spouse living at home, a minimum of \$19,908 may be protected for the spouse, in addition to the \$2000 allowed for the Assisted Living applicant/recipient.
Medical Need	A person must meet the same medical criteria as used to determine Intermediate Level of Care in a Nursing Home.

What Does It Cover?

An Assisted Living participant receives services on a daily, all-inclusive basis rather than on an itemized per-service basis.

Basic Assisted Living direct care services are:

- 1) Attendant care services
- 2) Therapeutic social and recreational activities
- 3) Periodic nursing evaluations
- 4) Limited nursing services
- 5) Assistance with medication in accordance with the Arkansas Nurse Practice Act
- 6) Medication oversight to the extent permitted under Arkansas law
- 7) Assistance obtaining non-medical transportation specified in plan of care.

The cost of services may not exceed the cost of nursing home care. Participants also receive the full range of Medicaid services.

How To Apply?

Apply at the County Department of Health & Human Services Office where the facility is located. Form DCO-777 must be completed to determine financial eligibility. A DHHS Registered Nurse will visit the applicant to assess for medical need, obtain the physician's signature on the forms and send to the Utilization Review Committee in Little Rock to determine medical eligibility. This program is subject to Estate Recovery provisions upon death of the client.

Income guidelines change January 2007. For more information visit

www.arkansas.gov/dhhs/aging

IndependentChoices

What Is It?

IndependentChoices is a Medicaid waiver for Medicaid eligible persons age 18 and above who have a medical need for personal care service.

Who Is Eligible?

Age	18 and above
Medicaid Requirement	Medicaid eligible or receiving Medicaid services in a category of Medicaid that covers personal care.
Medical Need	A person must have a medical need for personal care.

What Does It Cover?

This is a program that allows a Medicaid eligible person who needs assistance with personal care activities to exchange traditional agency personal care services for a cash allowance. Persons who choose IndependentChoices are responsible for hiring and supervising the work of their employee or a representative decision maker can assist the program participant with these responsibilities. The employee will perform or assist them with bathing, dressing, shaving, grooming, toileting, meal preparation and feeding, housekeeping, laundry and shopping. The employee cannot be a spouse, a legally appointed guardian, or a representative decision maker. Each participant in IndependentChoices is involved in creating a Cash Expenditure Plan that identifies how the allowance will be spent to meet his or her personal care needs. Persons who are interested in IndependentChoices will have a counselor and a bookkeeper who will provide support services to the program participant.

Where Do I Apply?

If you currently receive Medicaid, contact the Division of Aging and Adult Services at 1-888-682-0044 to initiate the application. If you are not a recipient of Medicaid, contact your local Department of Health & Human Services County Office to make application for Medicaid. A person must already be on Medicaid in order to receive services through IndependentChoices.

For more information visit www.arkansas.gov/dhhs/aging

Medicaid - Nursing Home Care

What Is It?

A category of Medicaid to pay for nursing home care.

Who Is Eligible?

A person must meet the medical need for nursing home care as determined by the Office of Long Term Care.

Income	\$1,809 per month Only the individual's income counts, even if he or she is married (see below). If income is above this limit the individual can be income eligible by establishing an Income Trust.
Resources	\$2,000 (Not all resources count.) The home, one car, and certain burial expenses are exempt.

Married persons are counted as separated when applying for Nursing Home assistance, and only the applicant's own income is counted. VA Aid & Attendance and the portion of a VA benefit that is paid for a dependent do not count as income. A couple's resources are divided according to Medicaid rules (see below).

Allowances for Spouses of Nursing Home Residents

If a nursing home resident qualifies for Medicaid assistance, some of his or her income may be used to support a spouse living in the community and dependent family members living with the spouse. Details about this can be obtained from the applicable County Department of Health & Human Services (DHHS) Office. However, some community spouses may be better off rejecting an allowance from their spouses, so they will not lose their Medicaid eligibility.

Rules for Dividing a Couple's Resources

When a married person first enters the nursing home, either spouse may request an initial assessment by the County Department of Health & Human Services Office to assess and document the couple's resources.

- If total resources are under \$19,908 the community spouse gets all.
- If total resources are \$19,908 to \$39,816 the community spouse gets \$19,908.
- If total resources are \$39,816 to \$199,080 the community spouse gets one-half.
- If total resources are over \$199,080 the community spouse gets \$99,540 (Maximum, effective January 1, 2006)

After the resources have been divided between spouses, the spouse in the nursing home must spend down his/her countable resources to \$2,000 to receive Medicaid assistance.

This program is subject to Estate Recovery provisions upon death of the client.

How To Apply?

Apply at the Department of Health & Human Services County Office in the county where the nursing home is located. Form DCO-777 must be completed to determine financial eligibility. For more information visit www.medicaid.state.ar.us/

Income guidelines change in January 2007

Commodities Distribution Program

What Is It?

The United States Department of Agriculture distributes surplus commodities on an irregular basis, as available.

Who Is Eligible?

Income (Net income after deductions):

1 person household	\$798.00
2 person household	\$1,070.00

Resources:

Households with a member Age 60 or older or disabled	\$3,000.00
Non-elderly/non-disabled Households	\$2,000.00

How To Apply For The Commodities Distribution Program?

Apply at the Community Action Agency in your county or check with your local food pantry.

Income guidelines will change October 2007

For more information visit www.arkansas.gov/dhhs/dco/

Home Energy Assistance (Regular)

What Is It?

One-time assistance per year in January toward heating costs.

Who Is Eligible?

Income:

1 person household	\$1,020.84
2 person household	\$1,375.00

Resources:

Households with a member Age 60 or older or disabled	\$3,000.00
---	------------

Non-elderly/non-disabled Households	\$2,000.00
--	------------

HEAP (Crisis Intervention)

What Is It?

One-time assistance on heating costs in an emergency situation.

Who Is Eligible?

Income:

1 person household	\$1,020.84
2 person household	\$1,375.00

Resources:

Households with a member Age 60 or older or disabled	\$3,000.00
---	------------

Non-elderly/non-disabled Households	\$2,000.00
--	------------

How To Apply?

Apply for these benefits at the Community Action Agency in your county.
For more information visit www.arkansas.gov/dhhs/dco/

Benefit is based on the availability of funds.

Note: Income limits are effective April 2007.

Weatherization

What Is It?

The Weatherization Assistance Program provides funds to conserve energy in the homes of low-income people, with emphasis on elderly, handicapped, and families with children. An automated energy audit National Energy Audit (NEAT) is used to determine the most cost effective measures on single frame houses. The Mobile Home Energy Audit (MHEA) is used to determine the most effective measures to be installed on mobile homes. A maximum \$2,744 can be spent on each home. Services include installing ceiling insulation, caulking, and weather stripping.

Who Is Eligible?

Income Limits	Individual	Couple
	\$1,020.84	\$1,375.00
Resource Limits	None	None

Gas heating stoves are also available on a limited basis for persons meeting the same guidelines as above. The applicant must either not have a stove or have inadequate heating source (such as, unvented stove or stove not working properly.) Stoves cannot be installed in mobile homes or rental property. A person is eligible even if he or she has received Weatherization services in the past.

How To Apply?

Apply at your local County Community Action Agency. For more information visit www.arkansas.gov/dhhs/dco/

Note: Income limits are effective April 2007.

Aging Services Summary of Eligibility

A number of services are available to individuals through a variety of funding sources. These sources include funding under the Older Americans Act, state general revenue, dedicated state taxes, and individual and community donations. Some services may be listed under Aging Services and Medicaid services, but the eligibility criteria may differ. Please refer to pages 42-44 for Medicaid Covered Services.

The following services are available through the Area Agencies on Aging (AAA) or through the Division of Aging and Adult Services. Eligibility for these services is determined by those offices. In most cases clients must be 60 or older (unless otherwise noted).

Priority consideration is given to applicants in greatest economic and social need. A co-payment is not required from individuals who receive these services; however, clients are encouraged to donate if they are able.

Eligibility and payment criteria may change as state and federal regulations are amended or renewed. For the most current information, consult the local AAA or call the Division of Aging and Adult Services.

Not every service is available in every region and a service available within a region may not be available in every location.

To apply for aging services listed on pages 38-41, please refer to the Area Agency on Aging for your county. Area Agencies on Aging, with the counties they serve, are listed on page 4 at the front of this booklet.

Aging Services

Adult Day Care: Clients must be physically or mentally impaired, and in need of care and supervision for periods of more than two (2), but less than 24 hours a day, in a place other than the client's own home. Program services include meals, transportation and recreational activities in a group setting. Available in AAA regions I and V. Also, available on private pay basis in some areas.

Adult Protective Services: Clients must be age 18+, endangered and unable to comprehend their danger. Services include complaint investigation and, where no family support is available, temporary custody. Reports of suspected abuse should be made to the 24-hour hot-line: 1-800-482-8049. All information is confidential. (Division of Aging and Adult Services).

Arkansas Senior Medicare/Medicaid Fraud Patrol: The ASMP (Fraud Patrol) program is funded by a federal grant from the Administration on Aging (AoA), Department of Health and Human Services. The Fraud Patrol, working with regional partners, recruits and trains senior professional volunteers to educate Arkansas citizens about Medicare and Medicaid fraud, with a particular emphasis on seniors and disabled. ASMP believes in empowering consumers to protect themselves from Medicare or Medicaid fraud, waste and abuse, and offers group presentations, one-on-one sessions, and a variety of educational materials and tools. Items such as Personal Medical Journals, Personal Medical Information Records, Nursing Home Guides for

those considering nursing home placement, and information to help with decisions about Medicare Part D drug plans are available through ASMP. ASMP has a toll-free hotline 1-866-726-2916 where suspected Medicare/Medicaid fraud may be reported. Those interested in volunteering with ASMP, scheduling a fraud presentation, or requesting materials may call the hotline as well. (Division of Aging and Adult Services).

Chore Service: Clients must be without significant social support systems that are able to perform services for them. This is a household service that may include chores such as simple household tasks, running errands, preparing food, heavy cleaning, and yard and walk maintenance, which the older person is unable to handle on his/her own and which do not require the services of a trained homemaker or other specialist. This cannot include medically oriented personal care tasks. Available in AAA regions I, IV, V, VI, VII and VIII. Also, available on private pay basis in some areas.

Client Representation: Providing assistance either in the form of access or care coordination in circumstances where the older person is experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by formal service providers or family caregivers. Activities of client representation include such practices as assessing needs, developing care plans, assisting with application form(s), authorizing and coordinating services among providers, and providing follow-up and reassessment, as required. Client Representation excludes any service covered by Title XIX under the Targeted Case Management Program for an eligible Medicaid Recipient. Available in all AAA regions.

Congregate Meals: A meal provided to a qualified individual in a congregate or group setting. Clients must be 60 or over. Spouses are also eligible. Meals may also be available to individuals with disabilities who are not older individuals but who reside in housing facilities occupied primarily by older individuals at which congregate nutrition services are provided. Meals that are served in a group setting such as a senior center or elderly housing facility are usually associated with activities to promote social interaction and reduce social isolation. The meal as served meets all of the requirements of the Older Americans Act and State/Local laws. Available in all AAA regions.

Employment Services: This service provides an organized program of counseling, assessment, training and placement in employment, either subsidized or unsubsidized. Clients must be 55 or older. Available in all AAA regions.

Home Delivered Meals: A meal provided to a qualified individual in his/her place of residence. Clients must be 60 or over. Spouses are also eligible. The meal as served meets all of the requirements of the Older Americans Act and State/Local laws. Available in all AAA regions. Also, available on a private pay basis in some areas.

Homemaker Services: Provides assistance such as preparing meals, shopping for personal items, managing money, using the telephone, doing light housework, and performing household management tasks such as menu planning, bill paying, checking account management, etc. Medically oriented personal care tasks are not to be included as a part of this service. All homemakers are trained in household management. Available in all AAA regions.

Information and Assistance: Available to all older persons, their families, and their friends. The service includes the provision of concrete information about services and benefits and where to obtain them; it may include assistance with referral to an agency providing needed services or benefits and follow-up to see that the referral was satisfactory. Available in all AAA regions and Senior Centers.

Legal Assistance: Provides legal advice, counseling and representation by an attorney or other person acting under the supervision of an attorney. Clients must be age 60 or older. This service may not be used for criminal charges. Available in all AAA regions.

Long-Term Care Ombudsman Program: The Arkansas State Long-Term Care Ombudsman Program (known as the Ombudsman Program) advocates for the rights of long-term care residents (www.arombudsman.com) . It is a statewide program comprised of both paid and volunteer Ombudsmen that addresses the complaints of nursing home, residential care and assisted living facility residents. Its representatives provide information on facilities, work for systematic change, and monitor the activities of the regulatory system. Available in all AAA regions.

Home and Community Based Ombudsman Program: The HCBS Ombudsman advocates for quality care and services in the Home and Community Base Waivers. The Ombudsman serves as a liaison between waiver participants and department or agency staff in resolving service related issues to ensure greater participant satisfaction. The Ombudsman provides referrals and assistance to those in need of additional resources. Contact the Division of Aging and Adult Services at 1-866-801-3435 for additional information.

Material Aid: Provides goods or payment of bills to meet or prevent an imminent emergency. (For example, purchase of necessities for someone whose house has been destroyed by fire, or payment of a utility bill to prevent imminent shutoff of service or the distribution of such items as clothing, smoke detectors, eyeglasses or security devices). Available in AAA regions III, IV, VI, and VIII.

Personal Care Services: Personal assistance, stand by assistance, supervision or cues. Clients must meet medical requirements for personal care. Provides assistance with basic tasks necessary to enable to client to remain living in the community. Services may include: assistance with bathing, grooming, dressing, and toileting; assistance with medication which are ordinarily self-administered by the client; assistance with food preparation and feeding; performance with incidental household services essential to the client's health and comfort in his/her home; assistance with transporting the client to and from his/her physician and/or medical facility for necessary medical service. Also available on private pay basis in some areas. Available in all AAA regions.

Repair/Modification/Maintenance: Provides home repairs essential for the health and safety of the elderly owner who is unable to perform the needed work; modifications to make the dwelling more accessible to physically disabled or frail owner; maintenance and service to basic

appliances, pest control, weatherization, health features etc. Client must own or be buying the home. Available in AAA regions IV and VII.

Respite Care: Services, which offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers. Respite Care includes: (1) In-home respite (personal care, homemaker, and other in-home respite); (2) respite provided by attendance of the care recipient at a senior center or other nonresidential program; (3) institutional respite provided by placing the care recipient in an institutional setting such as a nursing home for a short period of time as a respite service to the caregiver; and (for grandparents caring for children) summer camps. Available in all AAA regions.

Socialization: This service is generally associated with Senior Center activities. Facilitating client's involvement in activities to reduce social isolation and promote social interaction and well-being through on-going programs of physical and mental activity. Available at Senior Centers in all AAA regions.

Telephone Reassurance: Client must live alone or temporarily alone, or homebound in isolated areas. Service consists of telephone calls at appointed times to check client status. A completed call is one to the client household or one call placed to the client's emergency contact in the event the client does not answer the phone at the appointed time or there is a continual busy signal. If contact is not made the AAA is expected to follow up to verify the status of the clients' health and obtain necessary assistance. Available in AAA regions V and VI.

Transportation: This service transports clients from one location to another, so that the client has access to needed services, care or assistance, such as medical services, shopping, bill paying. See below for Medicaid Transportation. Available in all AAA regions.

Medicaid Covered Services

Questions regarding Medicaid eligibility or Medicaid services may be answered by the County Department of Health & Human Services Offices. These are examples of Medicaid Services that assist the elderly.

ElderChoices Program: Provides in-home services to individuals 65 or over, meeting financial eligibility (300% SSI), resources eligibility (\$2,000 – individual, \$3,000 – couple) and medical eligibility (admission to an intermediate nursing facility). These in-home services are designed to reduce or prevent institutionalization by maintaining, strengthening or restoring an eligible client's functioning in his or her own home, that of a care-giver or foster home. Services may include the following:

- **Adult Day Care** – Provides care and supervision to meet the needs of four (4) or more functionally impaired adults for periods of less than 24 hours, but more than two (2) hours per day in a place other than the client's own home. Services may include meals, transportation and recreational activities.
- **Adult Day Health Care** – Provides a continuing, organized program of rehabilitative, therapeutic and supportive health and social services and activities to individuals who are functionally impaired and who, due to the severity of their functional impairment, are not capable of fully independent living.
- **Adult Foster Care** – Provides a family living environment for eligible clients who are functionally impaired and who, due to the severity of their functional impairments, are considered to be an imminent risk of death or serious bodily harm and as a consequence are not capable of fully independent living. The home provides supportive services such as bathing, dressing, grooming, assistance with toileting and enhancement of skills and independence in daily living. Client pays for room and board costs.
- **Chore** – Provides heavy cleaning and/or yard and sidewalk maintenance only in extreme, specific and individual circumstances when lack of these would make the home uninhabitable. This service does not include routine lawn and yard maintenance.
- **Home Delivered Meals** – Provides one daily nutritious meal to eligible clients who are (1) homebound and (2) unable to prepare meals or are without an informal provider to do meal preparation. Each meal must equal one-third of the Recommended Daily Allowance.
- **Homemaker** – Provides basic upkeep and management of the home and household assistance. May include menu planning, running errands, laundry, essential shopping, meal preparation and simple household tasks. Medically oriented personal care tasks are not included as a part of this service.
- **Personal Emergency Response System** – Provides an in-home, 24-hour support system with two-way verbal and electronic communication with an emergency control center,

which enables an elderly, infirm, or homebound individual to secure immediate help in the event of a physical, emotional or environmental emergency.

- **Respite** – Provides temporary relief to persons providing long-term care for clients in their homes. Can be offered only in situations where there is a formal primary caregiver.

Alternatives for Adults with Disabilities: Provides attendant care and environmental modifications services to individuals ages 21 through 64 who are determined physically disabled by either Social Security or the DHHS Medical Review Team and who meet the criteria for intermediate nursing home care; the individual's income should be under 300% of the SSI Federal Benefit Rate and meet the resource limits for Medicaid. Persons who qualify will also receive regular Medicaid benefits such as doctor and hospital services. Clients choose their attendants and are responsible for training, hiring, firing and supervising activities.

IndependentChoices: A consumer directed Medicaid waiver for Medicaid eligible persons age 18 and older that gives clients a monthly cash allowance in exchange of traditional personal care. Participants in the program develop a cash expenditure plan and hire and supervise a worker who will assist them with their personal care needs. Some of the allowance can be used for goods and services related to the participants need for personal care assistance.

Assisted Living: A Medicaid home and community based waiver program that will provide 24-hour supervision and supportive services including limited nursing services in a congregate setting to persons (age 65 or over) or 21 years of age or over that are blind or disabled.

Other Medicaid Services:

- **Targeted Case Management** – Medicaid clients sixty (60) years of age or older who have limited functional capabilities and need assistance with the coordination of multiple services and/or resources may be eligible for this service. Case management services will assist Medicaid recipients in gaining access to needed medical, social, educational and other services.
- **Personal Care** – A Medicaid client may receive these services if he/she requires assistance with at least two activities of daily living tasks. Services may include assistance with basic personal care, meal preparation, essential household activities and transportation.
- **Home Health** – Medicaid clients may receive assistance with periodic nursing care to preserve life or prevent or delay the necessity of inpatient care. These services include “part-time” or “intermittent” care provided by a registered professional nurse, licensed practical nurse, student nurse or home health aide.
- **Hospice** – Terminally ill Medicaid clients may receive a continuum of care services under this category. Services may include routine home care, continuous home care, inpatient respite care and general inpatient care.

- **Transportation** – Medicaid clients may receive assistance with obtaining transportation to a medical facility. This may include ambulance services.

Arkansas Social Security Offices by County Served.

County	Telephone	Office	Address	City/State/Zip
Arkansas	870-534-0183	Pine Bluff Dist. Office	2522 Federal Bldg. 100 E. 8 th	Pine Bluff AR 71601
Ashley	870-862-5788	El Dorado Dist. Office	2600 W Hillsboro	El Dorado AR 71730
Baxter	870-424-3113	Mountain Home ResSta	955 Wallace Knob Rd, Suite 2	Mountain Home AR 72653
Benton	479-521-3435	Fayetteville Dist. Office	2153 E. Joyce Blvd., Suite 101	Fayetteville AR 72703
Boone	870-741-7677	Harrison Business Ofc.	131 W. Industrial Park Rd	Harrison AR 72601
Bradley	870-534-0183	Pine Bluff Dist. Office	2522 Federal Bldg. 100 E. 8 th	Pine Bluff AR 71601
Calhoun	870-862-5788	El Dorado Dist. Office	2600 W Hillsboro	El Dorado AR 71730
Carroll	870-741-7677	Harrison Business Ofc.	131 W. Industrial Park Rd.	Harrison AR 72601
Chicot	870-534-0183	Pine Bluff Dist. Office	2522 Federal Bldg. 100 E. 8 th	Pine Bluff AR 71601
Clark	501-525-6927	Hot Springs Dist. Office	112 Corporate Terrace	Hot Springs AR 71913
Clay	870-972-4620	Jonesboro District Ofc.	2608 Fair Park	Jonesboro AR 72401
Cleburne	501-268-5305	Searcy Business Office	701 Airport Loop	Searcy AR 72143
Cleveland	870-534-0183	Pine Bluff Dist. Office	2522 Federal Bldg. 100 E. 8 th	Pine Bluff AR 71601
Columbia	870-862-5788	El Dorado Dist. Office	2600 W Hillsboro	El Dorado AR 71730
Conway	479-968-2762	Russellville Bus. Office	2708 E Parkway Dr	Russellville AR 72802
Craighead	870-972-4620	Jonesboro District Ofc.	2608 Fair Park	Jonesboro AR 72401
Crawford	479-646-7154	Fort Smith District Ofc.	4933 Old Greenwood Road	Fort Smith AR 72903
Crittenden	870-735-7772	West Memphis Res.Sta	202B Shoppingway Blvd.	West Memphis AR 72301

Cross	870-633-3018	Forrest City Dist. Ofc.	200 N. Forrest Street	Forrest City AR 72335
Dallas	870-862-5788	El Dorado Dist. Office	2600 W Hillsboro	El Dorado AR 71730
Desha	870-534-0183	Pine Bluff Dist. Office	2522 Federal Bldg. 100 E. 8 th	Pine Bluff AR 71601
Drew	870-534-0183	Pine Bluff Dist. Office	2522 Federal Bldg. 100 E. 8 th	Pine Bluff AR 71601
Faulkner	501-833-9520	Conway Resident Sta.	2475 Christina Lane	Conway AR 72034
Franklin	479-646-7154	Fort Smith District Ofc.	4933 Old Greenwood Road	Fort Smith AR 72903
Fulton	870-793-3488	Batesville Business Ofc	111 North 12th Street	Batesville AR 72501
Garland	501-525-6927	Hot Springs Dist. Office	112 Corporate Terrace	Hot Springs AR 71913
Grant	870-534-0183	Pine Bluff Dist. Office	2522 Federal Bldg. 100 E. 8th	Pine Bluff AR 71601
Greene	870-972-4620	Jonesboro District Ofc.	2608 Fair Park	Jonesboro AR 72401
Hempstead	903-794-3756	Texarkana District Ofc.	1614 Hampton Rd./Howard Plz	Texarkana TX 75503
Hot Springs	501-525-6927	Hot Springs Dist. Office	112 Corporate Terrace	Hot Springs AR 71913
Howard	903-794-3756	Texarkana District Ofc.	1614 Hampton Rd./Howard Plz	Texarkana TX 75503
Independence	870-793-3488	Batesville Business Ofc	111 North 12th Street	Batesville AR 72501
Izard	870-793-3488	Batesville Business Ofc	111 North 12th Street	Batesville AR 72501
Jackson	870-972-4620	Jonesboro District Ofc.	2608 Fair Park	Jonesboro AR 72401
Jefferson	870-534-0183	Pine Bluff Dist. Office	2522 Federal Bldg. 100 E. 8 th	Pine Bluff AR 71601
Johnson	479-968-2762	Russellville Bus. Office	2708 E Parkway Dr	Russellville AR 72802
Lafayette	903-794-3756	Texarkana District Ofc.	1614 Hampton Rd./Howard Plz	Texarkana TX 75503
Lawrence	870-972-4620	Jonesboro District Ofc.	2608 Fair Park	Jonesboro AR 72401

Lee	870-633-3018	Forrest City Dist. Ofc.	200 N. Forrest Street	Forrest City AR 72335
Lincoln	870-534-0183	Pine Bluff Dist. Office	2522 Federal Bldg. 100 E. 8 th	Pine Bluff AR 71601
Little River	903-794-3756	Texarkana District Ofc.	1614 Hampton Rd./Howard Plz	Texarkana TX 75503
Logan	479-646-7154	Fort Smith District Ofc.	4933 Old Greenwood Road	Fort Smith AR 72903
Lonoke	501-833-9520	North Little Rock Ofc	3608 E. Kiehl	Sherwood AR 72120
Madison	479-521-3435	Fayetteville Dist. Office	2153 E. Joyce Blvd.	Fayetteville AR 72703
Marion	870-741-7677	Harrison Business Ofc.	131 W. Industrial Park Rd.	Harrison AR 72601
Miller	903-794-3756	Texarkana District Ofc.	1614 Hampton Rd./Howard Plz	Texarkana TX 75503
Mississippi	870-763-4976	Blytheville Bus. Office	1403 South Division Street	Blytheville AR 72315
Monroe	870-633-3018	Forrest City Dist. Ofc.	200 N. Forrest Street	Forrest City AR 72335
Montgomery	501-525-6927	Hot Springs Dist. Ofc	112 Corporate Terrace PO Box 5501	Hot Springs AR 71913
Nevada	903-794-3756	Texarkana District Ofc.	1614 Hampton Rd./Howard Plz	Texarkana TX 75503
Newton	870-741-7677	Harrison Business Ofc.	131 W. Industrial Park Rd	Harrison AR 72601
Ouachita	870-836-4366	Camden Res. Station	435 W. Washington Street	Camden AR 71701
Perry	479-968-2762	Russellville Bus. Office	2708 E Parkway Dr	Russellville AR 72802
Phillips	870-633-3018	Forrest City Dist. Ofc.	200 N Forrest St.	Forrest City AR 72335
Pike	870-624-0430	Hot Springs Dist. Ofc.	112 Corporate Terrace	Hot Springs AR 71913
Poinsett	870-972-4620	Jonesboro District Ofc.	2608 Fair Park	Jonesboro AR 72401
Polk	501-525-6927	Hot Springs Dist. Ofc.	112 Corporate Terrace	Hot Springs AR 71913
Pope	479-968-2762	Russellville Bus. Office	2708 E Parkway Dr	Russellville AR 72802

Prairie	501-833-9520	North Little Rock Ofc	3608 E. Kiehl	Sherwood AR 72120
Pulaski North	501-833-9520	North Little Rock Ofc	3608 E. Kiehl	Sherwood AR 72120
Pulaski South	501-324-5827	Little Rock Dist. Ofc	Rm 1201 Fed. Bldg 700 Capitol	Little Rock AR 72201
Randolph	870-972-4620	Jonesboro District Ofc.	2608 Fair Park	Jonesboro AR 72401
Saline	501-324-5827	Little Rock Dist. Ofc	Rm 1433 Fed. Bldg 700 Capitol	Little Rock AR 72201
Scott	479-646-7154	Fort Smith District Ofc.	4933 Old Greenwood Road	Fort Smith AR 72903
Searcy	870-741-7677	Harrison Business Ofc.	131 W. Industrial Park Rd.	Harrison AR 72601
Sebastian	479-646-7154	Fort Smith District Ofc.	4933 Old Greenwood Road	Fort Smith AR 72903
Sevier	903-794-3756	Texarkana District Ofc.	1614 Hampton Rd./Howard Plz	Texarkana TX 75503
Sharp	870-793-3488	Batesville Business Ofc	111 North 12th Street	Batesville AR 72501
Stone	870-793-3488	Batesville Business Ofc	111 North 12th Street	Batesville AR 72501
St. Francis	870-633-3018	Forrest City Dist Ofc	200 N. Forrest Street	Forrest City AR 72335
Union	870-862-5788	El Dorado Dist Office	2600 W Hillsboro	El Dorado AR 71730
Van Buren	501-268-5305	Searcy Business Ofc	701 Airport Loop	Searcy AR 72143
Washington	479-521-3435	Fayetteville Dist Office	2153 E. Joyce Blvd.	Fayetteville AR 72703
White	501-268-5305	Searcy Business Ofc	701 Airport Loop	Searcy AR 72143
Woodruff	870-633-3018	Forrest City Dist Ofc.	200 N. Forrest Street	Forrest City AR 72335
Yell	479-968-2762	Russellville Bus Office	2708 E Parkway Dr	Russellville AR 728

Social Security Administration District Offices for Arkansas

<p>Little Rock District Office Rm 1201, Federal Bldg. 700 West Capitol Ave. Little Rock AR 72201 Telephone: 501-324-5827 Fax: 501-324-7140</p>	<p>Forrest City District Office 200 N Forrest Street Forrest City AR 72335 Phone: 870-633-3018 Fax: 870-633-0622</p>	<p>Jonesboro District Office 2608 Fair Park Jonesboro AR 72401 Telephone: 870-972-4620 Fax: 870-931-5943</p>
<p>Conway Resident Station 2475 Christina Lane Conway AR 72032 Phone: 501-833-9520</p>	<p>West Memphis Res. Sta 202B Shopping Way Blvd West Memphis AR 72301 Phone: 870-735-7772</p>	<p>Batesville Business Office 111 North 12th Street Batesville AR 72501 Phone: 870-793-3488</p>
<p>North Little Rock Business Office 3608 E. Kiehl Sherwood AR 72120 Phone: 501-833-9520 Fax: 501- 833-9676</p>	<p>Mountain Home Resident Sta 955 Wallace Knob Rd., Suite 2 Mountain Home AR 72653 Phone: 870-424-3113</p>	<p>Searcy Business Office 701 Airport Loop Searcy AR 72143 Phone: 501-268-5305</p>
<p>Blytheville Business Office 1403 S. Division Street Blytheville AR 72315 Phone: 870-763-4976</p>	<p>Fayetteville District Office Suite 101 2153 E. Joyce Blvd. Fayetteville AR 72703 Telephone: 479-521-3435 Fax: 479-521-6759</p>	<p>Fort Smith District Office 4933 Old Greenwood Road Fort Smith AR 72903 Telephone: 479-646-7154 Fax: 479-646-6294</p>
<p>Pine Bluff District Office 2522 Federal Bldg/ 100 East 8th Pine Bluff AR 71601 Phone: 870- 534-0183 Fax: 870-535-5381</p>	<p>Harrison Business Office 131 West Industrial Park Rd. Harrison AR 72601 Phone: 870-741-7677</p>	<p>Russellville Business Office 2708 E Parkway Drive Russellville AR 72802 Phone: 479-968-2762</p>
<p>El Dorado District Office 2600 W Hillsborough El Dorado AR 71730 Telephone: 870-862-5788 Fax: 870-862-9133</p>	<p>Texarkana District Office 1614 Hampton Rd Howard Plaza Texarkana TX 75503 Telephone: 903-794-3756</p>	<p>Hot Springs District Office 112 Corporate Terrace Hot Springs AR 71913 Telephone: 501-525-6927 Fax: 501-321-0645</p>
<p>Camden Resident Station 435 W. Washington St. Camden AR 71701 870-836-4366</p>		

Arkansas Department of Health & Human Services County Offices

County	Phone	Street Address	PO Box	City	Zip Code
Arkansas	870-946-4519	100 Court Sq.		Dewitt	72042-2025
Arkansas	870-673-3597	203 S. Leslie	PO Box 1008	Stuttgart	72160-0270
Ashley	870-853-9816	201 W. Lincoln	PO Box 190	Hamburg	71646-0190
Baxter	870-425-6011	204 Bucher Dr.	PO Box 408	Mountain Home	72654-0408
Benton	479-273-9011	900 Southeast 13th Ct.		Bentonville	72712-5998
Boone	870-741-6107	2126 Capps Road	PO Box 1096	Harrison	72601-1096
Bradley	870-226-5878	902 Halligan	PO Box 509	Warren	71671-0509
Calhoun	870-798-4201	136 Archer	PO Box 1068	Hampton	71744-1068
Carroll	870-423-3351	304 Hailey Rd.	PO Box 425	Berryville	72616-0425
Chicot	870-265-3821	1736 Hwy. 65 & 82 So.	PO Box 71	Lake Village	71653-0071
Clark	870-246-9886	602 S. 10th Street	PO Box 968	Arkadelphia	71923-9068
Clay	870-598-2282	187 N, 2nd Street	PO Box 366	Piggott	72454-0366
Cleburne	501-362-3298	1521 W. Main	PO Box 1140	Heber Springs	72543-1140
Cleveland	870-325-6218	5 th & Main Street	PO Box 465	Rison	71665-0465
Columbia	870-234-4190	601 E. University	PO Box 1109	Magnolia	71754-1109
Conway	501-354-2418	#2 Bruce Street	PO Box 228	Morrilton	72110-0228
Craighead	870-972-1732	2920 McClellan Dr.		Jonesboro	72401-7291
Crawford	479-474-7595	704 Cloverleaf Cir.		Van Buren	72956-5060
Crittenden	870-732-5170	401 S. Airport Rd.		W. Memphis	72301-1734
Cross	870-238-8553	803 E. Hwy. 64	PO Box 572	Wynne	72396-0572
Dallas	870-352-5115	1202 W. 3rd St.		Fordyce	71742-9989
Desha	870-222-4144	200 North First Street	PO Box 1009	McGehee	71654-0111
Drew	870-367-6835	444 Hwy. 425 North	PO Box 1350	Monticello	71657-0449
Faulkner	501-730-9900	1000 E. Siebenmorgan	PO Box 310	Conway	72033-0310
Franklin	479-667-2379	800 W. Commercial		Ozark	72949-0261
Fulton	870-895-3309	222 Byron Road	PO Box 650	Salem	72576-0650
Garland	501-321-2583	115 Market St.		Hot Springs	71901-9990
Grant	870-942-5151	#16 Opportunity Dr.	PO Box 158	Sheridan	72150-0158
Greene	870-236-8723	809 Goldsmith Road	PO Box 839	Paragould	72451-0839
Hempstead	870-777-8656	116 N. Laurel		Hope	71801-0723

Arkansas Department of Health & Human Services County Offices *(continued)*

County	Phone	Street Address	PO Box	City	Zip Code
Hot Spring	501-332-2718	2505 Pine Bluff St.	PO Box 813	Malvern	72104-0813
Howard	870-845-4334	534 N. Main	PO Box 1740	Nashville	71852-1740
Independence	870-698-1876	100 Weaver Avenue		Batesville	72501-7393
Izard	870-368-4318	620 E. Main St.	PO Box 65	Melbourne	72556-0065
Jackson	870-523-9820	3rd & Hazel St.	PO Box 610	Newport	72112-0658
Jefferson	870-534-4200	1222 W. 6th	PO Box 5670	Pine Bluff	71611-3928
Johnson	479-754-2355	900 S. Rogers Ave.	PO Box 1636	Clarksville	72830-1636
Lafayette	870-921-4283	2612 Spruce Street		Lewisville	71845-0970
Lawrence	870-886-2408	400 N.W. 4th St.	PO Box 69	Walnut Ridge	72476-0069
Lee	870-295-2597	772 W. Chestnut St.	PO Box 309	Marianna	72360-0248
Lincoln	870-628-4105	101 W. Wiley St.		Star City	71667-1128
Little River	870-898-5155	90 Waddell St.		Ashdown	71822-2830
Logan	479-963-2783	#17 W. McKeen		Paris	72855-3228
Logan	479-675-3091	398 E. 2nd.		Booneville	72927-3703
Lonoke	501-676-5643	100 Park St.	PO Box 260	Lonoke	72086-0236
Madison	479-738-2161	1013 N. College Av.	PO Box 128	Huntsville	72740-0128
Marion	870-449-4058	114 Old Main	PO Box 447	Yellville	72687-0447
Miller	870-773-0563	3809 Airport Plaza		Texarkana	71854
Mississippi (1)	870-763-7093	1104 Byrum Road		Blytheville	72315-2802
Mississippi (2)	870-563-5234	437 S. Country Club Rd.		Osceola	72370-4207
Monroe (1)	870-747-3329	Hwy. 302 N.	PO Box 354	Clarendon	72029-2791
Monroe (2)	870-734-1445	301 1/2 N. New Orleans		Brinkley	72021-2813
Montgomery	870-867-3184	232 Graham St.	PO Box 445	Mount Ida	71957-0445
Nevada	870-887-6626	355 W. 1st St.	PO Box 292	Prescott	71857-0292
Newton	870-446-2237	100 Spring Street	PO Box 452	Jasper	72641-0452
Ouachita	870-836-8166	222 Van Buren St. NW	PO Box 718	Camden	71711-3931
Perry	501-889-5105	213 Houston Ave.		Perryville	72126-9539
Phillips	870-338-8391	104 D'Anna Place	PO Box 277	Helena	72342-0439
Pike	870-285-3111	331 E. 13th Street	PO Box 200	Murfreesboro	71958-0200
Poinsett	870-578-5491	406 N. Illinois	PO Box 526	Harrisburg	72432-0526

Arkansas Department of Health & Human Services County Offices *(continued)*

County	Phone	Street Address	PO Box	City	Zip Code
Polk	479-394-3100	606 Pine St.		Mena	71953-0807
Pope	479-968-5596	701 N. Denver		Russellville	72801-3403
Prairie	870-998-2581	663 Market St.	PO Box 356	DeValls Bluff	72041-0356
Pulaski South	501-682-9200	1105 MLK, Jr.	PO Box 2620	Little Rock	72203-2620
Pulaski North	501-682-0100	1900 E Washington	P O Box 5701	N Little Rock	72119-5701
Pulaski SW	501-371-1100	6801 Baseline Rd.	PO Box 8916	Little Rock	72219-9922
Pulaski East	501-371-1300	1424 E. Second		Little Rock	72203
Pulaski Jacksonville	501-371-1200	2636 W Main	P O Box 626	Jacksonville	72078
Randolph	870-892-4475	1408 Pace Rd.		Pocahontas	72455-4307
Saline (1)	501-315-1600	1603 Edison Ave.	PO Box 608	Benton	72018-0608
Saline (2)	501-847-6056	101 NW 3rd, Suite E		Bryant	72022
Scott	479-637-4141	S. Hwy. 71B	PO Box 840	Waldron	72958-0840
Searcy	870-448-3153	350 School Street	PO Box 279	Marshall	72650-0279
Sebastian	479-782-4555	616 Garrison Ave.		Fort Smith	72901-2598
Sevier	870-642-2623	108 Town North	Prof Bldg. A	DeQueen	71832-2007
Sharp	870-856-1053	1467 Hwy 62, 412 Suite B		Cherokee Village	72529
St. Francis	870-633-1242	1200 E. Broadway	PO Box 899	Forrest City	72336-0899
Stone	870-269-4321	1821 E Main St.		Mountain View	72560-9638
Union	870-862-6631	123 W. 18th St.		El Dorado	71730-7098
Van Buren	501-745-4192	362 Ingram Street		Clinton	72031-0126
Washington (1)	479-521-1270	4044 Frontage Rd.		Fayetteville	72703
Washington (2)	479-442-4029	4171 N. Crossover		Fayetteville	72703
White	501-268-8696	608 Rodgers Dr.		Searcy	72143-4199
Woodruff	870-347-2537	1200 Hwy 33 North	PO Box 493	Augusta	72006-0493
Yell	479-495-2723	818 M St./Hwy. 10 E.	PO Box 277	Danville	72833-0277

Community Action Programs Serving Arkansas

(Subgrantees of the AR Office of Community Services)

	Agency & Executive Directors	Counties Served
ARVAC	Arkansas River Valley Area Council, Inc. Bob Adkison, Executive Director P. O. Box 808 Dardanelle, AR 72834 (479)229-4861 Fax (479) 229-4863 arvac@arvacinc.org	Conway, Franklin, Johnson, Logan, Perry, Polk, Pope, Scott, Yell
BRAD	Black River Area Development Corp. Jim Jansen, Executive Director 1403 Hospital Drive Pocahontas, AR 72455 (870) 892-4547 Fax (870) 892-0707 jjansen@bradcorp.org	Clay, Lawrence, Randolph
CADC	Central Arkansas Development Council, Inc. Larry Cogburn, Executive Director P. O. Box 580 Benton, AR 72018 (501) 315-1121 Fax (501) 778-9120 lcogburn@cadcc.cc Web www.cadconline.net	Calhoun, Clark, Columbia, Dallas, Hot Springs, Lonoke, Montgomery, Pike, Pulaski, Ouachita, Saline, Union
CAPCA	Community Action Program for Central AR, Inc. Phyliss Fry, Executive Director 707 Robins, Suite 118 Conway, AR 72034 (501) 329-3891 Fax (501) 329-8642 phyliss@capcainc.org Web www.capcainc.org	Cleburne, Faulkner, White

	Agency & Executive Directors	Counties Served
CSO	Community Services Office, Inc. Leon Massey, Executive Director P. O. Box 1175 Hot Springs, AR 71902 (501) 624-5724 Fax (501) 624-1645 lemass@csohs.org	Garland
C-SCDC	Crawford-Sebastian Community Development Council, Inc. Weldon Ramey, Executive Director P. O. Box 4069 Fort Smith, AR 72914 (479) 785-2303 Fax (479) 785-2341 wramey@cscdcaaa.org Web www.cscdcaaa.org	Crawford, Sebastian
CRDC	Crowley's Ridge Development Council, Inc. Robert Wilford, Executive Director P. O. Box 1497 Jonesboro, AR 72403 (870) 802-7100 Fax (870) 935-0291 rwilford@crdcnea.com Web www.crdcnea.com	Craighead, Cross, Crittenden, Greene, Jackson, Poinsett, St. Francis, Woodruff
EOAWC	Economic Opportunity Agency of Washington County, Inc. Kathleen Randall, Executive Director 614 E Emma, Suite M401 Springdale, AR 72764 (479) 872-7479 Fax (479) 872-7482 krandall41@yahoo.com Web www.eoawc.org	Washington

Agency & Executive Directors	Counties Served
MDCS Mid-Delta Community Services, Inc Margaret Staub, Executive Director P. O. Box 745 Helena, AR 72342 (870) 338-6406 Fax (870) 338-3629 mmstaub@cox-internet.com	Lee, Monroe, Phillips, Prairie
MCAEOC Mississippi County AR Economic Opportunity Commission, Inc. Sam Scruggs, Executive Director 1400 N Division St, Bldg. 205 P. O. Drawer 1289 Blytheville, AR 72316-1289 (870) 776-1054 Fax (870) 776-1875 or (870) 776-1567 Sam.Scruggs@sbcglobal.net	Mississippi
NADC North Central AR Development Council, Inc. Larry Goodwin, Executive Director P. O. Box 3349 Batesville, AR 72503 (870) 793-5765 Fax (870) 793-2167 nadcinc@cei.net	Fulton, Independence, Izaard, Sharp, Stone
OHC Office of Human Concern, Inc. Al West P. O. Box 778 Rogers, AR 72757 (479) 636-7301 Fax (479) 636-7312	Benton, Carroll, Madison

Agency & Executive Directors	Counties Served
OOI Ozark Opportunities, Inc Roger Ratchford, Executive Director P. O. Box 1400 Harrison, AR 72602 (870) 741-9406 Fax (870) 741-0924	Boone, Marion, Baxter, Newton, Searcy, Van Buren
PBJCEOC Pine Bluff Jefferson County Economic Opportunities Commission, Inc. Betty Smith, Executive Director 1001 S. Linden P. O. Box 7228 Pine Bluff, AR 71611 (870) 536-0046 Fax (870) 535-7558 pbjceoc@sbcglobal.net	Grant, Jefferson, Arkansas, Cleveland, Lincoln
SEACAC Southeast AR Community Action Corp. Larry Henderson, Executive Director P. O. Box 312 Warren, AR 71671 (870) 226-2668 Fax (870) 226-5637 larry.henderson@ccc-cable.net	Bradley, Drew, Desha, Ashley, Chicot
SWADC Southwest AR Development Council, Inc. Tom Lockard, Executive Director 3902 Sanderson Lane Texarkana, AR 71854 (870) 773-5504 Fax (870) 772-6540 cirby@cableone.net	Sevier, Howard, Little River, Hempstead, Nevada, Miller, Lafayette

2006 Summary of Public Benefits for Seniors

Benefit *	Income Individual	Income Couple	Resources Individual	Resources Couple
SSI with SSA	\$623.00+	\$924.00+	\$2000	\$3000
SSI	\$603.00	\$904.00	\$2000	\$3000
QMB+	\$836.67+	\$1120.00+	\$4000	\$6000
ARSENIORS+	\$673.34+	\$900.00+	\$4000	\$6000
SMB+	\$1,000.00+	\$1,340.00+	\$4000	\$6000
QI-1+	\$1,122.50+	\$1,505.00+	\$4000	\$6000
ElderChoices, Alternatives, Assisted Living	\$1,809.00	—	\$2000	\$3000
IndependentChoices Medicaid eligible and enrolled or eligible for Medicaid personal care services			\$2000	\$3000
Electricity Sales Tax Exemption	\$12,000 Annual household income		No resource guidelines	
Medicare	Part B Premium Part B Deductible Hospital Deductible		\$88.50 \$124.00 \$952.00	
Benefit *	Income 1 person Household	Income 2 person Household	Resources Age-Disabled Household	Resources Regular Household
Food Stamps	\$798.00	\$1,070.00	\$3,000.00	\$2,000.00
Commodities	\$798.00	\$1,070.00	\$3,000.00	\$2,000.00
HEAP	\$1,020.84	\$1,375.00	\$3,000.00	\$2,000.00
HEAP (Crisis)	\$1,020.84	\$1,375.00	\$3,000.00	\$2,000.00
Weatherization	\$1,020.84	\$1,375.00	No resource guidelines	

These are general current income and resource guidelines as of April 2006. Please refer to the Public Benefits Handbook for more information regarding program eligibility. There are more eligibility factors to consider. + Indicates that \$20 income exclusion has been added in.